0940775

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

0937.0016

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |               |                               |                              |                  |     | SMALL ENTITY TYPE OR |                                       |                            | OTHER THAN<br>SMALL ENTITY |                        |
|--|---|---|---------------|-------------------------------|------------------------------|------------------|-----|----------------------|---------------------------------------|----------------------------|----------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 21            |                               | 4.71                         |                  | ſ   | RATE                 | FEE                                   |                            | RATE                       | FEE                    |
| FO   | R   |   | NUMBER FILED  |                               | NUMB                         | ER EXTRA         |     | BASIC FEE            | 355.00                                | OR                         | BASIC FEE                  | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | Z / minus 20= |                               | . /                          |                  |     | X\$ 9=               | 9                                     | OR                         | X\$18=                     |                        |
| IND  | EPENDENT CL   | AIMS                                      | 3 minus 3 =   |                               | *                            |                  |     | X40=                 |                                       | OR                         | X80=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |   |               |                               |                              |                  |     | +135=                |                                       | OR                         | +270=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in  |   |   |               |                               |                              | olumn 2          | 1   | TOTAL                | 364                                   | OR                         | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |   |   |               |                               |                              |                  | _   | SMALL E              | •                                     | OTHER THAN<br>SMALL ENTITY |                            |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |     | RATE                 | ADDI-<br>TIONAL<br>FEE                |                            | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus         | **                            |                              | =                |     | X\$ 9=               |                                       | OR                         | X\$18=                     |                        |
|  | Independent   | *   | Minus         | ***                           | r Ol 4/14                    | =                |     | X40=                 |                                       | OR                         | X80=                       |                        |
|  | FIRST PRESE   | NTATION OF MI                             | JUIPLE DEP    | ENDEN                         | CLAIM                        | <u> </u>         | ] [ | +135=                |                                       | OR                         | +270=                      |                        |
|  |   |   |               |                               |                              |                  |     | TOTAL<br>ADDIT. FEE  |                                       | ام                         | TOTAL<br>ADDIT. FEE        |                        |
|  | (Column 1) (Column 2) (Column 3)  |   |               |                               |                              |                  |     | ADDII. FCC           | · · · · · · · · · · · · · · · · · · · |                            |                            |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | PREVI                         | HEST<br>BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |     | RATE                 | ADDI-<br>TIONAL<br>FEE                |                            | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus         | **                            |                              | =                |     | X\$ 9=               |                                       | OR                         | X\$18=                     |                        |
|  | Independent   | *<br>NTATION OF MI                        | Minus         | ***                           | F.C.L. A.IA.A                | =                |     | X40=                 |                                       | OR                         | X80=                       |                        |
|  | FIRST PRESE   | NTATION OF M                              | JETIPLE DEP   | ENDEN                         | CLAIM                        |                  | ┛╽  | +135=                |                                       | OR                         | +270=                      |                        |
|  |   |   |               |                               |                              |                  | £   | TOTAL<br>ADDIT. FEE  | •                                     | OR                         | TOTAL<br>ADDIT. FEE        |                        |
|  |   | (Column 1)                                |               | (Colu                         |                              | (Column 3)       | _   |                      |                                       |                            |                            |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |     | RATE                 | ADDI-<br>TIONAL<br>FEE                |                            | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus         | **                            |                              | = .              |     | X\$ 9=               |                                       | OR                         | X\$18=                     |                        |
|  | Independent   | •   | Minus         | ***                           |                              | -                | ┧┟  | X40=                 |                                       | OR                         | X80=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL   |   |               |                               |                              |                  | ┚┞  | +135=                |                                       |                            | +270=                      |                        |
|  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |               |                               |                              |                  |     |                      |                                       | OR                         | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |               |                               |                              |                  |     |                      |                                       |                            |                            |                        |